

UNITED STATES DEPARTMENT OF THE INTERIOR NATIONAL
PARK SERVICE
PERIODIC CONCESSION EVALUATION REPORT
Swimming Pool Facilities – Standard No. XXI

FORM-621 (Rev 6/82)

Concid#:		Name of Concessioner:	
Region:		Facility/Service:	
Year of Evaluation:			

NOTICE TO CONCESSIONER: The elements (X) below were found deficient this date and must be corrected by the date(s) specified below. Failure to make correction(s) within the date(s) specified will result in downgrading the initial rating and may result in an unsatisfactory rating which may affect your

ELEMENTS/CLASSIFICATION
Check (Box) in space provided - applicable elements (APP.)
Check (Box) in space provided - those which are deficient (DEF.)

Element A. FACILITY EXTERIOR			Element E. SWIMMING POOL & POOL AREA			
			APP.	DEF.		
1.	Structure Condition (B)				17. Walls (sides) and Floors (A)	
2.	Grounds (B)				18. Apron Area (B)	
3.	Public Signs (C)				19. Depth Markings (B)	
4.	Garbage and Trash (B)				20. Ladders (B)	
Element B. FACILITY INTERIOR					21. Water Quality/Filter System (A)	
			APP.	DEF.		
5.	Public Restrooms (A)				Element F. SAFETY	
6.	Public Notices and Signs (C)				22.	First Aid Kit (A)
7.	Public & Other Areas (B)				23.	Reaching Poles and Buoys (A)
Element C. OPERATIONAL					Element G. OTHER	
			APP.	DEF.		
8.	Employee Performance (A)				24.	Vending (B)
9.	Employee Attitude (A)				25.	Beverage Container Guidelines (B)
10.	Employee Appearance (A)					
11.	Operating Hours (B)					
12.	Staffing (A)					
Element D. BATH HOUSE						
			APP.	DEF.		
13.	Shower Stalls (B)					
14.	Flooring (A)					
15.	Dressing Area & Clothes Storage (B)					
16.	Security (B)					

ITEM #	EVALUATION OBSERVATION	CORRECTED BY (Date)	CORRECTED BY (Date)

EVALUATION DATE	# OF OBSERVATIONS BY CLASSIFICATIONS			NUMERIC PERIODIC RATING	NPS EVALUATOR SIGNATURE	CONCESSIONER SIGNATURE
INITIAL	A	B	C			
				Preliminary		
FOLLOW-UP						
				Final		
REMARKS :						